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## BIB DATA SHEET

CONFIRMATION NO. 7592

<b>SERIAL NUMBER</b> 10/599,976	<b>FILING or 371(c) DATE</b> 08/07/2008 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b> 6102-000049/US/NP	
<b>APPLICANTS</b> Dieter Scheller, Neuss, GERMANY; Thomas Stohr, Monheim, GERMANY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP2005/004047 04/15/2005 which claims benefit of 60/562,681 04/16/2004 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/10/2008					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /MARCELA M. CORDERO GARCIA/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 40	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> HARNESS, DICKEY, & PIERCE, P.L.C 7700 Bonhomme, Suite 400 ST. LOUIS, MO 63105 UNITED STATES					
<b>TITLE</b> METHODS FOR PROPHYLAXIS OR TREATMENT OF CONDITIONS ASSOCIATED WITH CORTICAL SPREADING DEPRESSION					
<b>FILING FEE RECEIVED</b> 2470	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		